Mississippi Secretary of State

700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

715171171511111111111111111111111111111	TO HOL HEMO					
AGENCY NAME Board of Animal Health		CONTACT PERSON James A. Watson, D.V.M.		TELEPHONE NUMBER (601)359-1170		
ADDRESS P.O. Box 3889		CITY Jackson		STATE MS	ZIP 39207	
EMAIL SUBMIT jimw@mdac.state.ms.us DATE 10-11-11		Name or number of rule(s): Llamas				
Short explanation of rule/amendment/	repeal and reason	s) for proposing rule/amendm	ent/repeal:	Importation	of Llamas.	
Specific legal authority authorizing the	promulgation of ru	ile: Miss. Code of 1972, Sec. 69	9-15-9			
List all rules repealed, amended, or susp	ended by the pro	posed rule: Subpart 2, Chap. 1	2, Sec. 115			
ORAL PROCEEDING:		24.05.00				
An oral proceeding is scheduled for	this rule on Date	::				
igorimsq Presently, an oral proceeding is not	scheduled on this	rule.				
If an oral proceeding is not scheduled, an oral protein (10) or more persons. The written request should notice of proposed rule adoption and should include agent or attorney, the name, address, email addressment period, written submissions including a ECONOMIC IMPACT STATEMENT:	ould be submitted to to ade the name, address, ess, and telephone nur	he agency contact person at the above email address, and telephone number ober of the party or parties you repres	address withing of the person ent. At any tim	n twenty (20) da (s) making the re ne within the tw	ys after the filing of this equest; and, if you are an enty-five (25) day public	
Economic impact statement not req	uired for this rule.	Concise summary of ed	conomic imp	act statemer	nt attached.	
TEMPORARY RULES Original filing Renewal of effectiveness To be in effect in days Effective date: Immediately upon filing Other (specify):	Action propo New r Amen Repea Adopt Proposed fina Other	Action proposed: New rule(s) Amendment to existing rule(s) Repeal of existing rule(s) Adoption by reference Proposed final effective date: Other (specify):		FINAL ACTION ON RULES Date Proposed Rule Filed: 5-5-11 Action taken: X		
Printed name and Title of person au Signature of person authorized to fil	thorized to file rue rules:	lles://James A. Watson, D.	.V.M.			
OFFICIAL FILING STAMP	DO NOT	WRITE BELOW THIS LINE	0	FFICIAL FILIN	IG STAMP	
Accepted for filing by	Accepted fo	r filing by				

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.